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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor(s): Neyer et al.

Serial No: 10/088,922

Filed: 22 August 2002

For: METHOD FOR BONDING TWO
PLASTIC WORK PIECES WITHOUT
THE USE OF FOREIGN MATTER

Examiner: **D.J. Loney**

Art Unit: **1772**

Commissioner for Patents
Alexandria VA 22313-1450

Sir:

In response to the Office Action dated 7 November 2003, please enter the following amendments and remarks:

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/088,922
		Filing Date	22 August 2002
		First Named Inventor	Andreas Neyer
		Art Unit	1772
		Examiner Name	D.J. Loney
Total Number of Pages in This Submission	1	Attorney Docket Number	115.00US

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Form PTO 1449 w/copies cited references 2. Return Receipt Postcard
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Stephen C. Macevicz, Registration No. 30,285	
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